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#3

**Response To Notice To File Missing Parts Of Application  
Filing Date Granted (PTO-1533)(Large Entity)**

Docket No.  
49304(840)

In Re Application Of: XIAOMANG ZHANG, ET AL

Serial No.	Filing Date	Examiner	Group Art Unit
09/391,473	9/8/99	Not Yet Assigned	2712

Invention:

**PIXEL DEFECT DETECTOR FOR SOLID-STATE IMAGING DEVICE**

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

**Box Missing Parts**

This is a response to the Notice to File Missing Parts of Application - Filing Date Granted (PTO-1533) mailed on

9/24/99  
Date

Enclosed herewith for filing are the following:

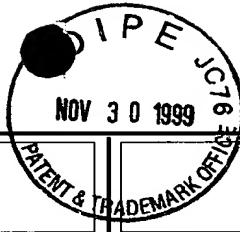
- A copy of the Notice to File Missing Parts of Application - Filing Date Granted (PTO-1533). **(REQUIRED)**
- An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date.
- A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date.
- An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date.
- A verified English translation of the non-English language application papers as originally filed. It is requested that this translation be used as the copy for examination purposes in the United States Patent and Trademark Office.
- Other (list):

**Assignment**

**Recordation Form Cover Sheet**

**Checks: \$40.00 Recordal Fee**

**\$890.00 (Filing Fee + Surcharge)**



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Completion of application fees as calculated below:

<input checked="" type="checkbox"/> Utility application filing fee	\$760.00
<input type="checkbox"/> Design application filing fee	
<input checked="" type="checkbox"/> Total number of independent claims = 2	
<input checked="" type="checkbox"/> Total number of claims = 17	
<input type="checkbox"/> Multiple dependent claims	
<input checked="" type="checkbox"/> Surcharge for late payment of filing fee and/or late filing of original declaration or oath	\$130.00
<input type="checkbox"/> Petition and fee for filing by other than all the inventors or a person not the invention	
<input type="checkbox"/> Fee for processing an application filed with a non-English language specification	
<input type="checkbox"/> Fee for processing and retention of application	
Total completion of application fees	\$890.00

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the above-identified Notice to File Missing Parts of Application. The requested extension is as follows (check time period desired). If an additional time extension is required, please consider this a petition therefor.

One month       Two months       Three months       Four months       Five months

from: \_\_\_\_\_ until: \_\_\_\_\_

*Date*

*Date*

Total time extension fees \_\_\_\_\_

Total fees due \_\_\_\_\_ \$890.00

**Response To Notice To File Missing Parts Of Application  
Filing Date Granted (PTO-1533) (Large Entity)**

Docket No.  
49304(840)

In Re Application Of: **XIAOMANG ZHANG, ET AL**

Serial No.  
**09/391,473**

Filing Date  
**9/8/99**

Examiner  
**Not Yet Assigned**

Group Art Unit  
**2712**

Invention:

**PIXEL DEFECT DETECTOR FOR SOLID-STATE IMAGING DEVICE**

TO THE ASSISTANT COMMISSIONER FOR PATENTS:  
Box Missing Parts

The fee of **\$890** is to be paid as follows:

- A check in the amount of the fee is enclosed.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. **04-1105**  
A duplicate copy of this sheet is enclosed.
- If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No.  
A duplicate copy of this sheet is enclosed.



*Signature*

Dated: **November 24, 1999**

**David G. Conlin**  
Reg. No. 27026  
Dike, Bronstein, Roberts & Cushman, LLP  
130 Water Street  
Boston, MA 02109  
617-523-3400

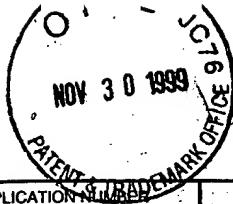
I certify that this document and fee is being deposited on Nov. 24, 1999 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.



*Holly F. Malarney*  
*Signature of Person Mailing Correspondence*

**Holly F. Malarney**  
*Typed or Printed Name of Person Mailing Correspondence*

cc:



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
09/391,473	09/08/99	KUBO	N 4930 (840)

09/08/99 09/08/99 KUBO N 4930 (840)

0222/0924

DAVID G CONLIN  
DIKE BRONSTEIN ROBERTS & CUSHMAN LLP  
130 WATER STREET  
BOSTON MA 02109

NOT ASSIGNED

2712

DATE MAILED:

09/24/99

**NOTICE TO FILE MISSING PARTS OF APPLICATION**

***Filing Date Granted***

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of  \$65.00 for a small entity in compliance with 37 CFR 1.27, or  \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a  
 small entity (statement filed)  non-small entity is \$ 760.00.

1. The statutory basic filing fee is:

missing  
 insufficient

Applicant must submit \$ 760.00 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

2. The following additional claims fees are due:

\$ \_\_\_\_\_ for \_\_\_\_\_ total claims over 20.

\$ \_\_\_\_\_ for \_\_\_\_\_ independent claims over 3.

\$ \_\_\_\_\_ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:

is missing or unsigned.  
 does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application was filed in a language other than English.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

9. OTHER:

Direct the reply and any questions about this notice to: "Attention: Box Missing Parts."

*File Missing Parts*

**A copy of this notice MUST be returned with the reply.**

12/01/1999 NPIASASD 00000003 09391473

9/30/99

02 FC:101

760.00 OP

03 FC:105

130.00 OP

Customer Service Center  
Initial Patent Examination Division (703) 308-1202

Nov 24 1999 4/24/2000

*KK*